

### ANMÄLAN OM BRISTER I HAMNARNAS MOTTAGNINGSANORDNINGAR

Internationella sjöfartsorganisationens (IMO) kommitté för skydd av den marina miljön har vid sin 42:a session (MEPC 42) godkänt en ny rapporteringsblankett för anmälan om brister i hamnarnas mottagningsanordningar för avfall. En modell av blanketten bifogas.

Rederierna skall se till att det på deras fartyg finns tillräckligt med kopior av blanketten.

Fartyget skall rapportera om bristerna genom att fylla i blanketten, som sänds till Sjöfartsverket, funktionen Sjösäkerhet.

Byråchef

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Förfrågningar:

Fartygstekniska enheten

Detta informationsblad  
ersätter informationsblad:

13/1.9.1989

Dnr 2445/30/2004  
ISSN 1455-9056

## ANNEX

**REVISED CONSOLIDATED FORMAT FOR REPORTING ALLEGED  
INADEQUACY OF PORT RECEPTION FACILITIES\***

The Master of a ship having encountered difficulties in discharging waste to reception facilities should forward the information below, together with any supporting documentation, to the administration of the flag State and, preferably, to the competent Authorities in the port State. The flag State shall notify the port State of the occurrence.

**1. SHIP'S PARTICULARS**

Name of ship: \_\_\_\_\_

Owner or operator: \_\_\_\_\_

Distinctive number or letters: \_\_\_\_\_

IMO No: \_\_\_\_\_

Gross tonnage: \_\_\_\_\_

Port of registry: \_\_\_\_\_

Type of ship: \_\_\_\_ oil tanker, \_\_\_\_ chemical tanker, \_\_\_\_ ferry, \_\_\_\_ cruise ship, \_\_\_\_  
cargo ship, \_\_\_\_ bulk carrier, \_\_\_\_ or other (specify) \_\_\_\_\_

**2. PORT PARTICULARS**

Country: \_\_\_\_\_

Name of Port or Area: \_\_\_\_\_

Location/Terminal Name: \_\_\_\_\_

(e.g. berth/terminal/jetty)

Name of company operating reception facility (if applicable): \_\_\_\_\_

\_\_\_\_ Unloading port, \_\_\_\_ Loading port, \_\_\_\_ Shipyard

Date of arrival: \_\_\_\_\_

Date of occurrence: \_\_\_\_\_

Date of departure: \_\_\_\_\_

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\* This format was developed and approved by the forty-second session of the Marine Environment Protection Committee in November 1998.

**3. TYPE AND AMOUNT\* OF WASTE FOR DISCHARGE TO FACILITY****3.1 Oil (MARPOL Annex I)**

Type of oily waste:

bilge water \_\_\_\_\_ m<sup>3</sup>sludge from fuel oil purifier \_\_\_\_\_ m<sup>3</sup>scale and slops from tanker cleaning \_\_\_\_\_ m<sup>3</sup>dirty ballast water \_\_\_\_\_ m<sup>3</sup>tank washings \_\_\_\_\_ m<sup>3</sup>other (specify) \_\_\_\_\_ m<sup>3</sup>

were facilities available? Yes \_\_\_\_ No \_\_\_\_

costs involved \_\_\_\_\_

**3.2 Noxious Liquid Substances (NLS) (MARPOL Annex II)**

Type of NLS residue/water mixture for discharge to facility from tank washings:

category A substance \_\_\_\_\_ m<sup>3</sup>category B substance \_\_\_\_\_ m<sup>3</sup>category C substance \_\_\_\_\_ m<sup>3</sup>other (specify) \_\_\_\_\_ m<sup>3</sup>

substance is designated as \_\_\_\_ solidifying or \_\_\_\_ high viscosity

proper shipping name of the NLS involved: \_\_\_\_\_

were facilities available? Yes \_\_\_\_ No \_\_\_\_

costs involved \_\_\_\_\_

**3.3 Garbage (MARPOL Annex V)**

Type of garbage:

1: Plastic \_\_\_\_\_ m<sup>3</sup>2: Floating dunnage, lining, or packing materials \_\_\_\_\_ m<sup>3</sup>3: Ground paper products, rags, glass, metal, bottles, crockery, etc. \_\_\_\_\_ m<sup>3</sup>4: Paper products, rags, glass, metal, bottles, crockery, etc. \_\_\_\_\_ m<sup>3</sup>5: Food waste \_\_\_\_\_ m<sup>3</sup>6: Incinerator, ash \_\_\_\_\_ m<sup>3</sup>other (specify) \_\_\_\_\_ m<sup>3</sup>

were facilities available? Yes \_\_\_\_ No \_\_\_\_

costs involved \_\_\_\_\_

**3.4 Other wastes**\_\_\_\_\_  
\_\_\_\_\_

\* Estimated amount

**4. WAS ANY WASTE NOT ACCEPTED BY THE FACILITY?**

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**5. INADEQUACY OF FACILITIES**

5.1 Remarks on inadequacies

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5.2 Location of facilities (close to the vessel, inconvenient location or vessel had to shift berth involving delay)

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5.3 If you experienced a problem, with whom did you discuss this problem or report it to?

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5.4 Did you give prior notification (in accordance with relevant port requirements) about the vessel's requirements for reception facilities?

Yes \_\_\_ No \_\_\_

5.5 Did you receive confirmation on the availability of reception facilities on arrival?

Yes \_\_\_ No \_\_\_

**6. ANY ADDITIONAL REMARKS/COMMENTS**

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7. Master's signature \_\_\_\_\_ Date \_\_\_\_\_

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